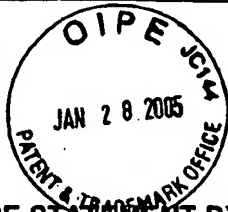


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INFORMATION DISCLOSURE STATEMENT BY APPLICANT - FORM 1449

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Examiner's Initials*	Document Number	Date MM/YYYY	Name (Family Name of First Inventor)	Class	Sub Class	Filing Date (if appropriate)
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OTHER (including in this order: Author, Title, Periodical Name, Date, Pertinent Pages, etc.)

Examiner /Henry Baron/ Date Considered: 06/26/2007

*EXAMINER: Initial if citation considered, whether or not citation is in conformance with MPEP § 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to Applicant.